

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M-G		2/15/00
O.I.P.E. CLASSIFIER		15	2-1-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		20874	4-6-00

Best Available Copy

INDEX OF CLAIMS

- Rejected
 - Allowed
 - (Through final appeal)
 - Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	1/15/00
2	1/15/00
3	1/15/00
4	1/15/00
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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